

IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO

IN RE:

DISRAELI LOPEZ DIAZ
JESSIBETH RODRIGUEZ LISBOA

DEBTORS

CASE NO. 13-04411-BKT

CHAPTER 13

**NOTICE OF FILING OF AMENDED CHAPTER 13 PLAN
AND CERTIFICATE OF SERVICE**

TO THE HONORABLE COURT:

COME NOW, **DISRAELI LOPEZ DIAZ and JESSIBETH RODRIGUEZ LISBOA** debtors in the above captioned case, through the undersigned attorney, and very respectfully state and pray:

1. Debtors are hereby submitting an amended Plan dated August 13, 2013, herewith and attached to this motion.

2. This amended chapter 13 Plan is filed to comply with Reliable Financial Services, Inc. objection.

I CERTIFY that on this same date a copy of this notice was sent by the Clerk of the Court using CM/ECF systems which will send notifications of such to the Chapter 13 Trustee; and also certify that I have mailed by United States Postal Service copy of this motion to the following non CM/ECF participants, debtors, Disraeli Lopez Diaz and Jessibeth Rodriguez Lisboa and to all creditors and parties in the above captioned case.

RESPECTFULLY SUBMITTED. In San Juan, Puerto Rico, this 13th day of August, 2013.

/s/ Roberto Figueroa Carrasquillo

ROBERTO FIGUEROA CARRASQUILLO

USDC #203614

ATTORNEY FOR PETITIONERS

PO BOX 186

CAGUAS PR 00726

TEL. NO. (787) 744-7699

FAX (787) 746-5294

EMAIL: rfigueroa@rfclawpr.com

United States Bankruptcy Court
District of Puerto Rico

IN RE:

Case No. 3:13-bk-4411

LOPEZ DIAZ, DISRAELI & RODRIGUEZ LISBOA, JESSIBETH

Chapter 13

Debtor(s)

AMENDED CHAPTER 13 PAYMENT PLAN

1. The future earnings of the Debtor(s) are submitted to the supervision and control of the Trustee and the Debtor(s) shall make payments to the Trustee ☒ directly ☐ by payroll deductions as hereinafter provided in the PAYMENT PLAN SCHEDULE.
2. The Trustee shall distribute the funds so received as hereinafter provided in the DISBURSEMENT SCHEDULE.

PLAN DATED: _____		<input checked="" type="checkbox"/> AMENDED PLAN DATED: <u>8/13/2013</u>	
<input type="checkbox"/> PRE <input type="checkbox"/> POST-CONFIRMATION		Filed by: <input checked="" type="checkbox"/> Debtor <input type="checkbox"/> Trustee <input type="checkbox"/> Other	
I. PAYMENT PLAN SCHEDULE		II. DISBURSEMENT SCHEDULE	
<div style="border-bottom: 1px solid black; padding-bottom: 5px;">\$ <u>375.00</u> x <u>60</u> = \$ <u>22,500.00</u></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">\$ _____ x _____ = \$ _____</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">\$ _____ x _____ = \$ _____</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">\$ _____ x _____ = \$ _____</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">\$ _____ x _____ = \$ _____</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">TOTAL: \$ <u>22,500.00</u></div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">Additional Payments: \$ _____ to be paid as a LUMP SUM within _____ with proceeds to come from: <input type="checkbox"/> Sale of Property identified as follows: _____ _____ <input type="checkbox"/> Other: _____ _____ Periodic Payments to be made other than, and in addition to the above: \$ _____ x _____ = \$ _____</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">PROPOSED BASE: \$ <u>22,500.00</u></div>		<div style="border-bottom: 1px solid black; padding-bottom: 5px;">A. ADEQUATE PROTECTION PAYMENTS OR _____ \$ _____</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">B. SECURED CLAIMS: <input type="checkbox"/> Debtor represents no secured claims. <input checked="" type="checkbox"/> Creditors having secured claims will retain their liens and shall be paid as follows: 1. <input checked="" type="checkbox"/> Trustee pays secured ARREARS: Cr. <u>FIRST BANK</u> Cr. _____ Cr. _____ # <u>4160000282983</u> # _____ # _____ \$ <u>4,225.92</u> \$ _____ \$ _____ 2. <input checked="" type="checkbox"/> Trustee pays IN FULL Secured Claims: Cr. <u>RELIABLE FINANCI</u> Cr. _____ Cr. _____ # <u>447670050000</u> # _____ # _____ \$ <u>9,707.60</u> \$ _____ \$ _____ 3. <input type="checkbox"/> Trustee pays VALUE OF COLLATERAL: Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 4. <input type="checkbox"/> Debtor SURRENDERS COLLATERAL to Lien Holder: _____ 5. <input type="checkbox"/> Other: _____ 6. <input checked="" type="checkbox"/> Debtor otherwise maintains regular payments directly to: <u>FIRST BANK</u> C. PRIORITIES: The Trustee shall pay priorities in accordance with the law. 11 U.S.C. § 507 and § 1322(a)(2) D. UNSECURED CLAIMS: Plan <input type="checkbox"/> Classifies <input checked="" type="checkbox"/> Does not Classify Claims. 1. (a) Class A: <input type="checkbox"/> Co-debtor Claims / <input type="checkbox"/> Other: _____ <input type="checkbox"/> Paid 100% / <input type="checkbox"/> Other: _____ Cr. _____ Cr. _____ Cr. _____ # _____ # _____ # _____ \$ _____ \$ _____ \$ _____ 2. Unsecured Claims otherwise receive PRO-RATA disbursements.</div> <div style="border-bottom: 1px solid black; padding-bottom: 5px;">OTHER PROVISIONS: (Executory contracts; payment of interest to unsecureds, etc.) * "Tax refunds will be devoted each year, as periodic payments, to the plan's funding until plan completion. The plan shall be deemed modified by such amount, without the need of further Court order. The debtor(s) shall seek court's authorization prior any use of funds." Debtor(s) to provide ADEQUATE PROTECTION PAYMENTS to Reliable Financial thru the Trustee in the sum \$100.00 per month for the next eight months or until confirmation. Debtor(s) to provide auto insurance upon maturity to Reliable Financial thru Eastern America Insurance Company. Debtor(s) consents to the LIFT of STAY in favor of TOYOTA MOTOR CREDIT claim no. 3 (paid by third party). Trustee will make no disbursements in favor of Toyota Motor credit, POC 3. Late filed claims filed by creditors will receive no distribution. "Surrenders collateral": Shares/savings in any Cooperativa/Association/Bank. Debtor reserves the right to object claims after plan confirmation.</div>	
III. ATTORNEY'S FEES (Treated as § 507 Priorities) Outstanding balance as per Rule 2016(b) Fee Disclosure Statement: \$ <u>2,881.00</u>			
Signed: <u>/s/ DISRAELI LOPEZ DIAZ</u> Debtor <u>/s/ JESSIBETH RODRIGUEZ LISBOA</u> Joint Debtor			

Attorney for Debtor R. Figueroa Carrasquillo Law Office

Phone: (787) 744-7699

LOPEZ DIAZ, DISRAELI
MANSIONES DE JUNCOS
56 CAOBA STREET
JUNCOS, PR 00777

RELIABLE FINANCIAL SERVICES
PO BOX 21382
SAN JUAN, PR 00928-1382

RODRIGUEZ LISBOA, JESSIBETH
MANSIONES DE JUNCOS
56 CAOBA STREET
JUNCOS, PR 00777

TOYOTA MOTOR CREDIT CORP
PO BOX 2730
TORRANCE, CA 90509-2730

R. Figueroa Carrasquillo
Law Office
PO Box 193677
San Juan, PR 00919-3677

AT&T
PO BOX 192830
SAN JUAN, PR 00919-2830

AT&T
5407 ANDREWS HWY
MIDLAND, TX 79706-2851

CLARO
PO BOX 70366
SAN JUAN, PR 00936-8366

COLON ATIENZA & REPOSSESSION
SERVICES PS
PO BOX 21382
SAN JUAN, PR 00928-1382

FIRST BANK
PO BOX 19327
SAN JUAN, PR 00910-1427

FIRST BANK
MONEY EXPRESS
PO BOX 19327
SAN JUAN, PR 00910-1427

LIBERTY CABLEVISION-PR
PO BOX 8759
CAGUAS, PR 00726-8759